Substitute for form 1449/PTO			,	Complete if Known		
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Application Number		
				Filing Date		
				First Named Inventor	Jay D. Cox	
				Art Unit		
				Examiner Name		
Sheet	1	of	1	Attorney Docket Number		

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Examiner	Cite	Document Number	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where	
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